Form **8871** (July 2000)

Political Organization Notice of Section 527 Status

OMB No. 1545-1693

Department of the Treasury Intotnal Revenue Service

() (cma) Rivenue Service	·	
Part I General Information		
1 Name of organization for	Delegate	Employer identification number
2 Mailing address (P.O. Box or numb	er, street, and rodd or suite nu	91-2063168
City or town, state, and ZIP code	40666	11 400 1100
3 E-mail address of organization	-49 @erols.	com
4a Name of custodian of records	4b Custo	dian's address
L-Karen Darne	4	69 S. Buchenon St.
5a Name of contact person	5b Conta	Croperson's address
Some as 4	aS	arre as 4a
6 Business address of organization (if	different from mailing address	shown above). Number, street, and room or suite number
City or town, state, and ZIP code		
Part II Purpose		
7 Describe the purpose of the organize	ation	To re-eledin
		centidate)
Part III List of All Related Er		-
8a Name of related entity	tities (see instructions) 8b Relationship	8c Address
		ac Address
L-Karen Donar	Delegate	969 S. Buchanan St
	(+ condudate)	Arlington, VA 22204
		RECEIVED
		AUG 0 2 2000
		OGDEN, UT
or Paperwork Reduction Act Notice, so	ee page 4.	Cat. No. 30405V Form 8871 (7-2000)

Under penalties of perjury, I declare that the organization named in Part I is to be treated as an organization described in section 527 of the Interna Revenue Code, and that I have examined this notice, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete.

Sign Here Signature of authorized official

7/27/QD Date

(2)

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